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## APPLICANTS

Svetlana V. Shchegrova, Campbell, CA;  
 William D. Fisher, San Jose, CA;  
 Peter G. Webb, Menlo Park, CA;

\*\* CONTINUING DATA \*\*\*\*\*

*no my*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none my*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/22/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 48	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i>	Examiner's Signature <i>[Signature]</i>	Initials			

## ADDRESS

AGILENT TECHNOLOGIES, INC.  
 Legal Department, DL429  
 Intellectual Property Administration  
 P.O. Box 7599  
 Loveland, CO 80537-0599

## TITLE

Error correction in array fabrication

FILING FEE RECEIVED 1580	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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